



# Academic Appeal Form

The University Academic Appeals Committee (UAAC) is the final arbiter in the process of requesting an exception to academic policy. **The UAAC reviews an appeal one time. A re-appeal for the same request will not be accepted.** It is important that you submit sufficient documentation with your appeal to support your case. Use black or dark blue ink only.

## The Appeal Process

1. Complete the *Academic Appeal Form* on the back of this information sheet. You (the student) must submit a *well-written letter*, **limited to one typed page**, along with adequate justification and pertinent documentation to the Registrar's Office (Administration Building, Room 110). *All materials must be received no later than 5:00 p.m. each Friday.* If you have any questions, call (208) 426-4129.
2. The University Academic Appeals Committee meets every Wednesday throughout the year, with a few exceptions. An appeal submitted with missing materials will result in a delay in going before the committee, so be sure to include all required forms, signatures, and documentation. Also, take care of any administrative holds (e.g., parking or library fines) in order for the appeal to be heard at the next scheduled meeting.
3. You should receive a written response to your appeal within three to four business days after the committee reviews your appeal. It is important to provide a complete mailing address to receive the notification. You may also call (208) 426-4249 after 3:00 p.m. on Wednesday to see if a decision has been made on your appeal.
4. If you want your appeal forwarded to the Fee Appeals Committee for their separate review, you must check the box: Forward to Fee Appeals Committee for consideration. Be aware that the Fee Appeals Committee is very specific about what medical documentation they will accept. Go to the following link for more details on their requirements: <http://vpfa.boisestate.edu/process/uformsdocs/uvappeal.pdf>.

## Documentation may include, but is not limited to:

- *Academic Adjustment Form* with required signatures
- *Registration Override Form* with required signatures
- Computer generated schedules or records of transactions
- *Early Reinstatement Plan of Study* with required signatures
- Letters of support from faculty, advisor, physician, employer (on letterhead with their signature)
- Medical appointment history and bills
- Military orders
- Obituaries, funeral or memorial service program

## Appropriate Appeals for the University Academic Appeals Committee:

- Academic adjustments for university graduation requirements, such as waiving residency, changing the minimum number of credits or GPA needed, using an expired catalog, etc. (*must be accompanied by an Academic Adjustment Form with the required signatures*).
- Adding/dropping/withdrawing from classes or submitting applications for certain courses (e.g., independent study, internship, practicum, dissertation, thesis, projects) after the published deadline dates.
- Other requests for exceptions to academic policies and procedures.

## What is NOT Appropriate for Appeal to the University Academic Appeals Committee:

- Grade appeal concerning the grade itself (<http://academics.boisestate.edu/undergraduate/appeals/>)
- Academic grievances concerning faculty (<http://academics.boisestate.edu/undergraduate/appeals/>)
- Issues related to financial aid and Satisfactory Academic Progress (SAP)



# Academic Appeal Form

## 1. Student Information

USE BLACK OR DARK BLUE INK ONLY

First Name	M.I.	Last Name	Student ID Number (or SSN if unknown)
Mailing Address (Note: this address will be used to update our records)		City	State ZIP
Daytime phone Number		BroncoMail or Preferred Email Address	
Declared Major			Expected Graduation Date

## 2. Mark the Category of Your Appeal

- |   |   |
|---|---|
| <input type="checkbox"/> <b>Adding a Course</b><br>Attach a <i>Registration Override Form</i> with instructor's signature. Financial aid may not be available   | <input type="checkbox"/> <b>Early Reinstatement:</b><br>Attach Early Reinstatement Plan of Study form with required signatures  |
| <input type="checkbox"/> <b>Complete Withdrawal</b> from a past semester<br>Be aware that this could impact your financial aid  | <input type="checkbox"/> <b>Request to Return After Third Dismissal:</b><br>Attach Early Reinstatement Plan of Study with required signatures                                 |
| <input type="checkbox"/> Forward to Fee Appeals Committee for consideration   | <input type="checkbox"/> <b>Academic Adjustment Form:</b><br>Attach this form with appropriate signatures if you are requesting to waive university requirements to graduate. |
| <input type="checkbox"/> <b>Dropping a course</b><br>Regular Session—after classroom instruction ends<br>All other sessions—after the end date of the session<br>Refer to the Academic Calendar. Be aware this could impact your financial aid. | <input type="checkbox"/> <b>Other:</b> (please explain)<br>_____<br>_____<br>_____  |
| <input type="checkbox"/> Forward to Fee Appeals Committee for consideration   |   |
| <input type="checkbox"/> <b>Change Credit to Audit OR Audit to Credit:</b><br>Attach instructor permission on <i>Registration Override Form</i> . Be aware that this could impact your financial aid.   |   |

3. Semester (please check one)       Fall       Spring       Summer      Year \_\_\_\_\_

## 4. Course Information (do not list courses in the case of a complete withdrawal)

5-Digit Class Number	Subject and Catalog Number (e.g., ENGL 102)	Section (e.g., 001)	Session (Regular, 1 <sup>st</sup> 8-week, 2 <sup>nd</sup> 5-week, etc.)

**Registrar's Use Only**

Last Day to Add w/o #:	Last Day to Add w/#:	Last day to Drop w/o W:	Last Day to Drop or CW:
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## 5. Attach your typewritten request with justification and documentation to this cover sheet.

Check the following documents that are included with your appeal:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Student Letter (required)         | <input type="checkbox"/> Military Orders          | <input type="checkbox"/> Other (please explain):<br>_____<br>_____<br>_____ |
| <input type="checkbox"/> Academic Adjustment Form          | <input type="checkbox"/> Obituary/Funeral Program |   |
| <input type="checkbox"/> Early Reinstatement Plan of Study | <input type="checkbox"/> Override Form            |   |
| <input type="checkbox"/> Medical Records/Report            | <input type="checkbox"/> Police Records           |   |
| <input type="checkbox"/> Support Letters                   | <input type="checkbox"/> Telephone Records        |   |

I have read the appeals information and procedures on pg. 1. I have attached my letter of explanation, which is limited to one typed page, and have included pertinent documentation

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Important: make a copy for your records

**Registrar's Use Only**

Contacts made or comments
<input type="checkbox"/> Pending <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> No Action Taken <input type="checkbox"/> Sent To Fee Appeals Committee (if applicable)